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SINGULAR CASE OF PARALYSIS.

[Communicated for the Boston Medical and Surgical Journal.]

On the 11th of December, 1844, there came to the State Lunatic Hospital an interesting young female, who was represented to have been insane four weeks. She had previously had chorea, and immediately preceding this attack of insanity had had typhus fever. Her age was 15, her countenance very agreeable, saddened by an expression of extreme melancholy, and she was suffering at short intervals with paroxysms of severe headache. She had little appetite, constipated bowels, cold extremities, and amenorrhœa. She remained without much change for some weeks, suffering from headache and pain in the eyes, with a remarkable staring and projection of the eyeballs, during the paroxysms. At the expiration of six or eight weeks she had improved considerably in health and spirits, and the periods of headache were less frequent and less severe, and she appeared decidedly better. Through the winter she improved favorably, regained her cheerfulness and mental activity, and appeared to be gradually convalescing. The headache recurred occasionally, but less severely. She engaged in domestic labor with alacrity, was cheerful in her temper, playful and happy, and extremely lovely in her character. These favorable appearances continued till some time in March, when the affection of the head became worse, and she apparently lost ground, became desponding, lost her appetite and appeared much more ill through the month of April, suffering extremely from headache. During the month of May her sufferings were intense. She was very much confined to her bed, having severe spasms and great prostration of strength. In the course of this month she lost the senses of sight, hearing, taste and smell, and lay for many days in a condition of indescribable distress, often beating her head with great violence, moaning and tearing her hair in agony. With the exception of the motion of her hands she seemed entirely palsied. In this condition she remained some weeks, cut off from all intercourse with the world, and, as she expressed herself afterwards, feeling that she was removed to some dismal dungeon, where she was fed, but saw and heard no one. While she was in this situation, we were expecting daily the occurrence of epilepsy or convulsions, that would terminate her life and end her sufferings. She was not conscious at the time that she had lost her senses, but supposed that she was far removed from light and sound, from human society, and all the comforts of

life. She called most imploringly upon those around her to speak to her, to answer her inquiries, and not leave her to the darkness and the silence of the grave.

Contrary to expectation, she gradually came out of this state, and recognized a few friends by their dress and other external marks. Her mind was gradually restored, but it was a long time before she was conscious that all her senses were gone but feeling, which was found to be very acute. By means of the *manual alphabet*, which she had previously learned, she was taught that she was blind and deaf, and soon by this medium she communicated to her friend that she had lost both taste and smell—which was afterwards verified by satisfactory experiments. She improved in health favorably, but slowly, but never again recovered the senses of hearing or seeing. She could after a while communicate her thoughts by speech, and more or less of the time she could taste and smell; but at times these senses, also, were wholly lost.

The sense of feeling became very acute, and her touch was astonishingly accurate and sensible. She could read the raised letters of the blind alphabet, and soon learned to read the prints designed for their instruction. At this time she was able to walk about, converse, and enjoy intercourse with her friends by the manual alphabet. On the 17th of June she had another attack like the first, and lost the power of speech and all means of intercourse with the surrounding world; suffered extremely from headache, neuralgia, dyspepsia, and palpitation of the heart; had frequent pulse, dry skin, thirst, furred tongue, general distress, loss of appetite, and loss of strength. These paroxysms occurred about once in two months, and lasted two weeks or more. In the intervals she would be cheerful and happy, yet extremely animated in her intercourse with friends and strangers, although she was rarely free from severe headache two days in succession, and had lost her speech, the use of her lower limbs, and had no communication with the world around her, excepting by the sense of feeling, by means of the acute sense of touch, and the use of the manual alphabet. The feet were not only paralyzed, but had lost the sense of feeling, so that needles and pins stuck into them gave her no sensation whatever. When in her best state, by means of a chair on wheels, she could visit all parts of the Hospital, and seemed delighted with everything that came to her knowledge through this solitary medium to the mind.

In October she had another paroxysm of extreme suffering, which lasted for many days; and now, when she got better, her hands were found paralyzed, she had lost the sense of feeling, and was deprived of the only medium of communication left her, the sense of touch and the manual alphabet! Her situation was now more deplorable than ever. She was entirely deprived of the means of communicating with the external world.

A faithful friend, who never deserted her, by great perseverance invented an imperfect alphabet with her fingers on her face, and was able to communicate simple ideas to her in this novel manner. In the course of a few weeks the sensibility of her hands was restored to her imper-

ferly, so that she could again avail herself of the manual alphabet. She continued very comfortable through the month of November and the most of December, enjoying the amusements and festivities of the season very well, notwithstanding the loss of her senses and her speech, and her entire inability to walk. Towards the last of December she had another severe attack, during which the muscles of the neck became paralyzed, and she could never sit up afterwards. From this time she gradually declined, suffered severely from pain, dyspepsia, vomiting, inability to retain food, and emaciation—till death relieved her of her sufferings on the morning of the 4th of February, by a rapid succession of epileptic convulsions.

During all this illness, which she bore with unexampled patience, she retained her mind and was able to communicate with her friends and physician through her accustomed medium, excepting for a few days in the paroxysms before alluded to. After the recovery from the first turn of melancholy, the mind of this patient, in her lucid intervals, was clear and intelligent, her perceptions quick, her wit sparkling and her imagination sprightly. She enjoyed life, and especially society, was able to work ingeniously and skilfully, notwithstanding she was deaf, dumb, blind, had lost the use of her limbs, and much of the time could neither taste nor smell. That the mind should remain unclouded when so large a portion of the brain was involved in disease, and the senses so generally destroyed, is a problem that I am totally unable to solve.

The following were the morbid appearances after death, as found on a *post-mortem* examination, made with care and skill, by Dr Sargent, of this town, assisted by Drs. Bates and Woodward Jr., twenty-four hours after death—furnished from the minutes of the latter.

External appearance of the body, pale and bloodless; lips and extremities of fingers livid; emaciation extreme.

**THORAX.**—*Heart* everywhere healthy, small in size, the walls of the ventricles very thin. Lungs showed miliary tubercles throughout, with strong adhesions of the pleural surfaces at both apices.

**ABDOMEN.**—When the abdomen was opened, the attention was first called to the singular appearance of the omentum. This organ was strongly adherent to the anterior wall of the abdomen, probably, as the sequel will show, from old peritonitis. Upon incision it was found nearly an inch in thickness, hard and firm before the knife, and showing everywhere tubercular infiltration, but no softening. On raising it out of the abdominal cavity, a most singular state of things was observed below; the peritoneal surface of all the organs which were visible, was considerably injected and covered with a coating of recent lymph, which was viscid to the touch, and could be easily scraped off with the knife. Besides this, the whole peritoneum was thickly studded with fine tubercles. The liver was pale in color, of natural size, and healthy, but strongly adherent to the omentum. The stomach showed no marks of disease, excepting that the mucous coat was injected in a few small patches. The spleen was healthy; the pancreas healthy. The mucous coat of the alimentary canal was somewhat injected, but to all appearance healthy.

The mesenteric glands were all enlarged, but none of them softened. The kidneys had each of them a few crude tubercles, of small size in their cortical portion; otherwise healthy. The bladder and uterus healthy. The ovaries were both extensively involved in tuberculous disease, which in the left organ had gone on to softening.

**HEAD.**—Dura mater strongly adherent to the bone towards the occiput, most towards the right side, longitudinal sinus distended with very dark blood; vessels of the pia mater unusually turgid; surface of the brain healthy in appearance, the convolutions nowhere flattened. The brain was examined by removing thin slices from each hemisphere, going from above downwards, till the ventricles were opened. The remainder was then removed from the skull in a mass, and examined.

**CEREBRUM.**—Both hemispheres were healthy down to a level with the upper wall of the ventricles, the substance of good color and quite firm. The ventricles contained more than the usual amount of fluid. The remainder of the brain then being turned out of the cranium, was examined from the base. Coagulable lymph was effused all about the root of the optic nerves, and also over the corpora quadrigemina. The pia mater was strongly adherent to the brain at this part. In the posterior lobe of the right hemisphere a diseased portion was found, an inch in diameter, which upon examination proved to be a mass of fungoid disease. The substance of the brain all around it was softened, of the consistence of soft butter, of a pale yellow color. The remaining portion of the right hemisphere was healthy. In the anterior lobe of the left hemisphere a similar fungous portion was found, about half the size of the one in the right hemisphere, surrounded by extensive softening of a white color like jelly, and almost transparent.

The cerebrum and medulla oblongata were healthy. The spinal cord was not examined.

This singular case had been treated by leeches, blisters, cathartics, mercurials and cold applications to the head, and finally by morphine during the severe paroxysms of suffering, which very sensibly mitigated the distress. After each of these paroxysms some ground was lost in the case, some new evil presented itself, although in the intervals there was increase of strength and flesh, and indications of returning health. After the first, she lost her sight, hearing, taste and smell. After the second, her speech. After the third, the lower extremities became palsied and insensible; then the hands, of which she partially recovered; and finally the muscles of the neck were paralyzed, and epilepsy closed the scene.

The day before her death she was quite sensible and intelligent, and recognized her friends readily by touch. She slept well till near morning, when epilepsy occurred, and she died in about six hours; during this time only was she insensible.

S. B. W.

*Worcester, Ms., Feb. 16, 1846.*



## BIOGRAPHICAL NOTICE OF DR. EDWARD LAMB, OF MONTPELIER, VT.

[Communicated for the Boston Medical and Surgical Journal.]

THE parentage of Dr. Lamb was respectable. His father, Samuel Lamb, Esq., was for a number of years Town Clerk of Charlton, Mass.; he likewise was a captain in the revolutionary service. His mother was the daughter of Edward Davis, Esq., of Oxford, and sister of Col. Jacob Davis, who commenced the settlement of Montpelier in 1787. Edward Lamb, while young, attended the schools in his native town with good repute, after which he spent some time at Leicester Academy. He likewise studied the languages with the Rev. Mr. Pope, of Spencer. It is understood that the late Judge Paine was fitted for college by the same gentleman. After this preparatory course, Edward Lamb commenced the study of medicine with Dr. Eaton, of Dudley, who was esteemed a well-educated and skilful physician. He passed through the usual course of study as taught in those days, without enjoying the benefit of the schools, but was well approbated by his preceptor. In 1796 he came to Montpelier, and commenced practice among the first settlers of the town. At that time the place must have been quite different from what it now is, and the Doctor was called to pass through many difficulties from which his successors are exempted. Little do the present physicians of this flourishing and populous town, know of the hardships he had to encounter during the early part of his practice. But a small proportion of the inhabitants were then able to pay their physician anything for his services; yet they must be visited, and this, too, by night and by day, whether the roads were bad or whether there were no roads; streams must be crossed, whether there were bridges or no bridges; and when business could not be done on horseback, it must be done on foot. All this must be frequently accomplished without any other remuneration than that of having discharged the duties of humanity. In those days they who were able to pay for medical services were not very punctual to do it. The physician must wait long, and then take what was most convenient in order to satisfy his customers. With such a state of things it is not surprising that a man of Dr. Lamb's easy habits should have had to struggle in poverty, with all its inconveniences, for a long season. These trials would have been sooner overcome, had he not been subjected to an expensive and vexatious lawsuit, growing out of his profession, the details of which are foreign to this notice.

In 1804 he was chosen to represent the town in General Assembly, then sitting in Rutland, which shows the estimation in which he was held by his townsmen at that time; but political life was not his proper sphere. He chose to devote himself to the duties of his profession, and this he did, with an occasional interruption, for nearly half a century. Many were the epidemics he was called to encounter during this long period, and it was in the treatment of these that his skill was most conspicuous. The dysentery of low type of 1806, spotted fever of 1811 and 1812, pneumonia typhoides of 1813 and 1814, scarlatina, typhus

and typhoid fever of succeeding years, afforded him an ample opportunity for the exercise of his talents; and such was his success in the treatment of these and kindred diseases, as to give general satisfaction, and to gain for him an enviable reputation.

He early learned to distinguish between inflammation and fever, and to regulate his practice accordingly. In determining the type of fever, in noting the symptoms, and in adapting remedies to meet the case, his judgment was uncommonly good. His prognosis was generally correct. His own death was caused by a slow bilious fever operating upon a worn out constitution, for which he prescribed with his accustomed skill for ten days, when he became convinced that he should die near the fourteenth day of the fever, which event took place as he had predicted.

Dr. Lamb's treatment of fever was rather old fashioned, but may not be less successful on that account. Untrammelled by system, and a close observer, he made every case to rest upon its own merits. Not only in the commencement but in the progress of the fever, he was thorough in the use of evacuants. Emetics, cathartics and sudorifics were his favorite remedies. With these were frequently combined the diffusible stimulants. In his hands this practice was safe and judicious. The shock given to the system by an emetic, whenever it can be tolerated, attended with an evacuation of the stomach, and a consequent relaxation of the capillaries, acts powerfully in overcoming febrile action. If a temporary debility sometimes ensues, it is readily overcome by the administration of diffusible stimulants, or other appropriate remedies. No physician, it is presumed, ever gave more emetics than Dr. Lamb, but they were well chosen, well timed, and used in such a manner as to meet the condition of the system. His favorite emetic was ipecacuanha and sulphate of zinc combined. Sulphate of copper was sometimes preferred to the zinc, especially if the lungs were affected. To give a specimen of the doctor's prescribing, the following case, reported for the County Medical Society in 1824, is selected. "I was called to visit a patient in consultation with a neighboring physician, who had been sick about fifteen days with the epidemic typhus fever. I found the patient in a state of collapse. His symptoms were strongly typhoid, such as delirium, reaching after notes in the air, picking the bedclothes, and subsultus tendinum; in fine, he labored under nearly all the bad symptoms of malignant typhus in the last stage. My prescriptions were as follows. I first gave an emetic of sulphate of zinc and ipecac., and directed the same to be repeated every other day through the whole course of the disease. I also directed small doses of calomel to be given three times a day, unless his mouth should become sore, in which case James's powder and camphor were to be substituted. I likewise advised a powder composed of gm. opium, musk, camphor and ipecac., to be given every four hours while his delirium lasted, the vol. fetid tincture to be given occasionally instead of the above powder. If the calomel failed of moving his bowels daily, castor oil was to be given for that purpose. Brandy and flies were applied externally. Nothing relieved him so much as the emetics. After his bad symptoms subsided, and the fever had left him, we pursued the common course, and the patient got well."

That Dr. Lamb was a man of very respectable acquirements, not only in his profession but in general knowledge, cannot be denied. He possessed an uncommon memory. The names and history of distinguished individuals were more familiar to him than to most men; but he was far from being an universal genius. He never acquired much celebrity in his profession, except in the treatment of fever. In practical surgery he could neither perform its minor operations or use much manual dexterity in any case whatever. Indeed, the doctor was quite peculiar in every sense of the word. His oddities appeared, no doubt, less striking to his friends and acquaintances than to strangers. The writer of this notice very well remembers what were his impressions on his first introduction to him in 1814. At that time he was a representative of the town in General Assembly. His humorous conversation and exhaustless fund of anecdote rendered him quite amusing and attractive. A story to serve as an illustration was ever at his command, and was always told in good style. Among the sick it is thought that his *capital story* as often relieved a paroxysm of pain as did his anodyne. He generally left his patients in better spirits than he found them.

The Honorary Degree of Doctor in Medicine was conferred upon him in 1824 by the Castleton Medical Institution, when connected with Middlebury College. At this time he had surmounted, in a great measure, the difficulties of the profession, and a happier day dawned upon his hitherto vexed life. From the commencement of his practice in 1796, until near the period of his death, although he mingled in and took a part in the prevailing topics of the day, his time was principally devoted to medical pursuits. The good of the profession ever lay near his heart. Quackery in all of its forms received from him many a cutting rebuke. He likewise lashed the vices of the day, and was ever found on the side of good morals. Some things in his life we could have wished had been otherwise. It is to be regretted that he was so seldom seen in the sanctuary, and that he should neglect to secure to himself all the blessings of the christian religion. This negligence may well be deplored; but let it be remembered, we are called upon to follow his example so far as it is worthy of imitation, and no farther. No one will look to Dr. Lamb as a model. With all his imperfections, it may be maintained that he possessed traits of character worthy of record; that in one department of his profession, at least, he excelled; that in private life he was inoffensive and honest-hearted; that he was a man of sound sense and good judgment; that his moral sense made him equally opposed to infidelity and bigotry; that during a long and useful life, he was ever found on the side of wholesome law and good order; and that his memory is worthy of being cherished by surviving friends and a grateful public.

That the doctor was culpably negligent in the management of his worldly concerns, no one will doubt. A settlement of his accounts, whether the balance was in his favor or against him, was equally his aversion. As might be expected, such a man must be a poor pay master. He had become so familiar with a *dun*, as to care little about it. A fumbling of the pockets, thereby showing a willingness to pay if he had the ability,

was generally followed by a promise which was soon forgotten. After all, although the doctor died poor, he had enough to make him comfortable in old age, and to discharge all his honest debts; which is more than can be said of many *shrewd* men of business.

Dr. Lamb, in person, was of middling size, well proportioned, with an intellectual countenance, and of pleasing appearance. In the room where he died hangs an excellent likeness of the doctor, which, it is hoped, will be carefully preserved by the family connections. He lost his wife about twenty years ago, since which time, to that of his death, he remained single, and has left no children to mourn his loss or to perpetuate his name.

S.

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ON FUNGOUS ULCER OF THE TOE, OR THAT DISEASE USUALLY  
STYLED INVERTED TOE NAIL.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—My attention has for some time been directed to this complaint, but I have not been satisfied with the treatment of any surgeon till I tried that of Dr. Zeis, which does away with former horrid operations, which he plainly shows "are based upon erroneous principles." Dr. Zeis, after alluding to the barbarous methods of Neret, Larrey, Payan, Barbette, Bordez, Pettigrew, Bonnet, Lechler, and others, gives his own simple and rational plan, which I am confident will always cure this frequent and tedious affection.

Wardrop tells us to cut away the nail and apply lunar caustic. Stafford's method consists in pouring hot wax into the excavation. Desault directs us to keep the nail and flesh separated by a plate of tin; and Dr. Dorsey, finding this "exceedingly painful," recommends "a simpler, easier, and more effectual remedy—the excision of the inverted edge of the nail!" Sir A. Cooper and Dupuytren direct cutting through the nail, and tearing away the offending portion with forceps. Druitt applies blisters, or dissects out the nail, with the gland that secretes it, &c.

If time permitted I would give the particular treatment that I employed in three cases of long standing; they were all speedily cured by the plan pursued, which was principally derived from the paper of Dr. Zeis.

The nature of the disease is inflammation and ulceration of the soft parts; the nail may be too long, or too short; it is often too thick; but it is evident that *the ulcer* is to be considered the seat of the complaint, and "the destruction of the whole or any part of the nail is in no case required, and the operation from its severity should be considered unwarrantable."

The indications of cure are, 1st, To quiet pain and subdue inflammation; 2d, To restore the soft parts; 3d, To control the growth of the nail; and, lastly, to attend to the general health.

The first of these indications is fulfilled by securing rest, the frequent use of the foot-bath, the removal of the fungous granulations, and the patient should wear loose shoes. Secondly, the ulcer should be stimulated

with solutions of sul. zinci., sul. cupri, or argent. nit., twice or thrice a-day, and then it should be dressed with lint and simple cerate. Thirdly, if the nail is too thick, it must be scraped thin; if too short, it should be allowed to "grow to its proper length," nor should it get too long, for the pressure of the shoe will give it a downward direction, and this must be avoided by properly trimming the nail, and "inserting portions of lint behind it and the soft parts." Lastly, if the general health is bad, the patient may be treated as his case demands. Two of the three cases that I have referred to were treated chiefly with alteratives, such as the *blue pill* and the *comp. syr. sars.* The other one was a chlorotic female, and I gave her the *sup. carb. ferr.*, grs. x. to xv. ter in die.

I hastily suggest these remarks for the purpose of calling the attention of practitioners more directly to the subject; and if I shall influence any one to throw away "old notions," or former doctrine, and make trial of Dr. Zeis's treatment in ulcers of the toe, I am sure that my intentions will be partially answered.

Respectfully yours,

Lime Rock, R. I., Feb. 4th, 1846.

J. P. LEONARD.

#### ASTHMA.

To the Editor of the Boston Medical and Surgical Journal.

Sir,—In the Journal of February 4th the question has been put forward by Querist, "Is excessive venery ever a cause of asthma?" As an exciting cause I should think it might be classed among the other many sources giving origin to the disease. The abuse of the venereal appetite is a more serious subject than many imagine, frequently destroying the individual in the act, and often times laying the foundation of serious structural lesion. It is particularly dangerous after surgical operations, inducing sudden and fatal hemorrhage. (In the last peninsular war numbers died from this cause.) Apoplexy sometimes occurs, especially if the stomach be distended with food. Celsus gives excellent advice, when warning us to avoid coition after meals or during the day. If I recollect aright, two cases are on record of rupture of the right auricle taking place during the act.

As to its producing asthma, it might do so by deranging the powers of assimilation, causing a reflex irritation to be communicated through the eighth pair, the condition of the nervous system, more especially the nerves of respiration, giving the bronchial muscles unusual irritability. Hence, I do not think that humoral or spasmodic asthma would be probable to occur in copulation. The lesion most likely to take place would be a rupture of the air cells by excessive or sudden dilatation, in fact *interlobular emphysema*, which if not extreme would be apt to subside spontaneously. I imagine the case cited by "Querist" as occurring in the act of coition to have been one not of asthma, but of this description.

Derry, N. H., February 12th, 1846.

Yours respectfully.

N. M.

## MEDICAL MATTERS AT THE WEST.

*Indiana Medical College (Laporte), Jan. 28, 1846.*

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I propose to give you some little notice of medical matters at the West, thinking that perhaps it might interest some of your readers to be informed, from time to time, of the progress of our profession in this region. First, then, of our Medical College. It is the only Medical School in the State of Indiana, containing a population of more than 800,000 inhabitants. Michigan has a population of between 4 and 500,000, without a medical school; and Illinois, also, lying contiguous, with a population of between 6 and 700,000; and these States, rapidly filling up with inhabitants, besides the two Territories of Wisconsin and Iowa, to be supplied with physicians from some source. It becomes, then, a matter of serious inquiry, How are these States to be supplied with intelligent and skilful physicians and surgeons? The Eastern schools do not as yet furnish the requisite number; for every year, during the prevalence of fevers, everything bearing the cognomen of doctor is fully employed. This state of things has given encouragement to quackery, and hence the most barefaced pretensions have been encouraged to embark in all branches of the profession, and have in many instances been richly rewarded by a golden harvest in dollars and cents. The well-educated physician from the Eastern schools has often found himself eclipsed by the mere pretender, whose only knowledge was that quinine and calomel sometimes cured fevers; and, humiliated and chagrined at his want of success on his first commencing practice at the West, has retired from the profession in disgust, or finds fault with what he may think a want of appreciation on the part of the people.

Now a word to the young man commencing business West. In the first place, he must keep in view that most of the diseases that he meets with are either of a malarious origin, in the shape of fevers, or so modified by malaria as to present peculiarities which ought to be kept closely in view. The treatment of a disease so universally under the influence of this all-pervading cause, will stagger all his preconceived notions on the subject, and hence his reading and his teaching hitherto will be found to avail him little. He has a case of pleuritis. He bleeds, gives tartrate of antimony liberally, purges his patient, blisters—in short, puts in practice the whole round of antiphlogistic remedies, and just at the time the patient ought to get well, according to books and lectures, all at once a sinking of the patient comes on unexpectedly, the pulse fails, and a fatal collapse is the result. What is the cause of this unexpected termination? will be the inquiry. Why, the question is easily answered. There is a foe in ambush, ready on all occasions to enter the breach made in the constitution by disease. That foe is malaria, disguised in every possible form, lurking about the weak points of the system, to seize the favorable opportunity to enter and complete the work already begun.

In order to treat the diseases successfully at the West, it is necessary that the physician be well versed in this matter, and therefore it is desira-

ble that strict attention be paid to this particular branch of his education ; that this instruction be accompanied by clinical examinations of cases of fever under the immediate supervision of the Professor of Theory and Practice, who should be a man of great experience and acknowledged skill in the treatment of these diseases. This is one reason why it is desirable that young men, who expect to practise medicine in the West, should be educated on the spot.

What are the facilities for teaching medicine there? is the next inquiry. There are a great number of young men, enterprising, talented, and desirous of embarking in the profession ; but the distance from medical school's prevents them, or they embark in practice without proper qualifications, and are, in fact, no better than quacks. Our medical school was founded on this principle—the wants of the citizens of Indiana ; and under a liberal charter from the State, commenced with a small class four years ago. It is but two years, however, since the present faculty was organized, and this winter we have a class of between 60 and 70 students, and 17 candidates for graduation. Our college is located in the beautiful village of Laporte, about 250 miles south-west of Detroit, and 80 east of Chicago, surrounded by a fertile agricultural country, and a dense population.

With regard to the facilities of teaching, we have a commodious building, well arranged lecture rooms, &c., and an anatomical museum, which is increasing under the industrious efforts of our indefatigable Professor of Anatomy. Our *chemical* apparatus is respectable, and sufficient to illustrate that branch of science in its improved state. With respect to the facilities of teaching anatomy, I would observe that the *matériel* is abundant, so much so that every student who desires it can be furnished with subjects for dissection at a price which he can well afford to meet. It might be supposed that there would be a want of the proper facilities for teaching the practical parts of surgery ; but this is not so, by any means. For the number of surgical operations which the class have witnessed during the present session has been quite numerous, and in this respect will challenge comparison with many of the old schools. There has been one amputation of the thigh, three of the leg, one of the foot, one for club-foot, and the removal of several large tumors, operations on the eye, and a great many minor operations, together with clinical instruction in this department ; and these operations must increase as it becomes generally known to the surrounding country that such facilities exist. In view of these things, we feel quite confident that our school will succeed, for it is founded on the wants and wishes of the people, who have too long been infested with a set of merciless, ignorant quacks.

A society has also been organized here, styled the *North Western Academy of the Natural and Medical Sciences*, for the cultivation of medical and scientific subjects. About eighty members have already united with it, and it is in contemplation to publish a monthly journal devoted to medicine and its auxiliary branches. From this you will see that there is something more going on West than the raising of wheat and pork, and speculating in Western lands.



We have had epidemic erysipelas here to some extent this winter. Last spring we lost one pupil out of our class with this disease, and another has fallen a victim this year; the latter case was one of great malignity. He was taken with sore throat and violent fever, with extreme pain in his head and back. The fourth day the eruption came out on his face, and spread rapidly over his face and scalp. He became delirious on the seventh day, and died on the ninth, comatose. He was a very plethoric young man, with a short neck, large cerebrum, and full chest. He was bled freely in the first stage of his disease, took cathartics, saline diaphoretics, and had the nitrate of silver applied freely to the inflamed skin and swollen tonsils and fauces. The *autopsy* exhibited strong marks of cerebral congestion of the vessels of the pia mater, but no effusion, or anything that would denote the least amount of inflammation or organic changes in the brain. Our Professor of Theory and Practice is now convalescing from the same form of disease. He was taken while attending this young man, had an attack of rigors, followed with fever, sore throat and pain in the head. This continued for a week, when the pulse came up to 130, and continued so until the eleventh day of the disease, when there was a striking exacerbation in the fever, and the eruption came out on the nose and spread very slowly over the face and scalp. The pulse at one time went as high as 160 per minute, and it was rarely less than 130 for several days. He is a strong, muscular and plethoric man; and throughout the first stage of the disease, the muscular strength remained tolerably good, and the day before the eruption appeared on the face, he actually rode out, against the strong remonstrances of his friends. There was a kind of mental aberration, however, which probably gave him artificial strength at the time. We used powerful depletion the first and second day of the attack, by bleeding him from forty to fifty ounces each time, and when the erysipelatous inflammation appeared on the face, applied the nitrate of silver freely over the surface. One or two other young gentlemen of our school are down with the disease, but they are not dangerous cases; but anginose affections are very prevalent, showing that the atmosphere is contaminated with the epidemic principle. In other respects the country is now extremely healthy, and there has been but little of the usual accompaniments of a changeable winter, viz., coughs, colds and bronchial inflammations. The winter set in early, and with a severity unusual here; but the month of January has been very mild, and at this time the ground is free from snow or frost.

Very respectfully, yours,

A. B. SHIPMAN.

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#### TOOTH EXTRACTOR—A NEW INSTRUMENT.

[Communicated for the Boston Medical and Surgical Journal.]

THE peculiarities of this instrument may be summed up as follows. The shaft of the instrument is single, from the cross that forms the handle, until within an inch and a fourth from its distal extremity, when it diverges with a gradual curve, and forms a compound lever, with two parallel

branches, the ends of which are prepared with shoulders to enter corresponding round sockets. One of these is midway in the fulcrum, formed like the Italic letter *c*, the concave face of which looks towards the tooth; the other in the hook, which is formed with a concave and convex surface, the superior portion of which is united by a cross-bar with the corresponding portion of the fulcrum, and forms the body of the instrument, which is retained, in connection with the branches of the shaft, by a depression from the end to its union, which is filled with a spring, having a jutting face upon its distal extremity, which springs upon the face of the hook. With a knowledge of the structure of this instrument, its operation will at once become apparent, and its superiority over the varieties now in use; causing less pain to the patient, and rendering the extraction of the most difficult tooth easy to the operator. Its peculiar construction adapts it to the various forms and diameters of the teeth, however much they may be decayed; as it raises the tooth directly upwards without spreading or enlarging the cavity more than is absolutely necessary for the escape of the roots, which it effects with a steady, uniform motion, making the root the basis upon which rests the fulcrum.

E. R. SMILE.

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## THE BOSTON MEDICAL AND SURGICAL JOURNAL.

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BOSTON, FEBRUARY 25, 1846.

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*Massachusetts State Lunatic Asylum—Dr. Woodward's Thirteenth Report.*—So completely is the medical superintendent of the State Lunatic Hospital identified with the institution, that, as a matter of course, the people of Massachusetts associate his name with it, and, as regularly as the revolution of the seasons, expect to have his annual report. In it, too, we always look for something original, as an evidence of his devotion to the daily comfort of the multitudes of unfortunate fellow beings placed under his care. Every one who can borrow, beg or buy this interesting document should read it. It gives a graphic insight into the condition of those who see angels at the window; who hold conversations with cherubs; chat with the devil, or hold converse with the dead. The case of the orphan girl of fifteen, some account of which may be found in to-day's Journal, keeps one in a state of excitement beyond the power of fiction. Finding it quite difficult the present week to say as much as the subject demands, in regard to the past year's report to the Legislature, we purpose to resume the topic again, or give extracts from the report.

*New Hampshire Asylum for the Insane.*—This institution is located on an eminence half a mile west of Main street, Concord. The situation is one of unrivalled beauty, commanding a prospect embracing the State House and public buildings, with a panoramic view of the rich valley of

the Merrimac and the adjacent country for many miles in circuit, and for salubrity is not exceeded. The arrangement of the buildings is every way perfect, and admirably adapted to their designed purpose, equally fitted to the more quiet and sensitive, as well as the violent and noisy.

The Asylum is fully supplied with intelligent and faithful attendants, and every essential means of exercise and recreation. The method of treatment adopted is that which modern science inculcates for the unfortunate insane, viz, a kind and sympathizing attention, restoration of the healthy bodily functions, constant mental occupation and varied amusements. A farm of 120 acres affords, for such as choose it, one of the most efficient means of recovery—agricultural labor.

This institution has been in operation three years, during which time it has received 320 patients. Its annual reports have demonstrated that of recent cases about nine-tenths recover, and of the chronic cases from one sixth to one fourth. The prospect of recovery is nearly in direct ratio with the duration of the malady.

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*Massachusetts State Prison.*—In addition to the statistics from Dr. Bemis's Report which we have already given, the following suggestions are copied. Dr. B. is a judicious medical officer, and his recommendation to the Legislature will doubtless procure the improvements alluded to.

"Connected with the health of the prison, I beg leave to mention two subjects which I deem important to receive attention; a better ventilation of the sleeping cells, and more complete apparatus for bathing.

"The defect of the former seems owing to the mode of construction of the night prison, in not having larger outer windows. The deficiency in question is only felt in the extreme heat of summer. To this cause in part is attributable the diarrhoea which quite a number experienced a slight attack of, as above noticed. This subject has received the attention of the warden; but at present I understand he considers it doubtful whether a remedy can be afforded without a substantial alteration of the prison structure.

"In regard to the matter of bathing, no argument need be used to show that an occasional bath of warm water, during the cold months of the year, would conduce as much to health as to cleanliness. At present, the prison is without this useful and salutary convenience, and therein is behind the better ordered arrangements, in this respect, of a prison on the solitary system of another State.

"The beneficial operation of the establishment of the Board of Commissioners on Lunacy, to investigate cases of insanity in the prison, has had but little occasion to display itself during the past year. No instances have occurred requiring a removal of an insane prisoner to the State Lunatic Hospital. But I have been glad to avail myself of their advice in one instance, where, though I was persuaded of the insanity of the convict, I thought fit to yield to the prisoner's own request, and permit him to return to labor. This was after he had become tranquil, and when employment would obviously be better for his health than confinement. At the meeting of the Commissioners, the others were of the same opinion, and the convict soon regained his health.

"It must be obvious, however, that the co-operation of skilful and scientific physicians who have devoted an exclusive attention to the intricate

subject of insanity, must be of great advantage in judging of the responsibility of those who are made the subjects of prison punishment, and of the expediency of their removal."

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*The Elements of Surgery.*—The second volume of the American edition of Velpeau's *New Elements of Operative Surgery*, translated by P. S. Townsend, M.D., of New York, has been completed—and a magnificent undertaking it is, redounding to the honor of the indefatigable translator, whose perseverance is creditable to the country. He has given to the profession of the United States, a grand system, emanating from a source at once commanding the confidence and the respect of all who practise surgery. When the fact is known that this massive series of three octavos—another being in a state of preparation—are illustrated by over three hundred engravings incorporated with the text, accompanied by an atlas in quarto, of twenty-two plates, representing the principal operative processes, instruments, &c., it will be acknowledged that it embraces the entire domain of surgery, from alpha to omega, and must be considered as an unrivalled production.

Of the character or capabilities of M. Velpeau, nothing is required to be said, to induce any one to patronize this enterprise of the Messrs. Langley, the New York medical publishers.

In addition to the affixes already enumerated, to this extensive treatise, there is an admirable accompaniment on minor surgery, besides several hundred pages of new matter, comprising all the latest improvements and discoveries in surgery, in America and Europe, up to the present time. This has been prepared under the supervision of Dr. Mott, who has contributed to the whole both notes and observations. We look forward with some considerable anxiety for the concluding volume, and shall not fail to explain to those who have not yet examined any part of Dr. Townsend's laborious task, those excellencies which give value to his translation.

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*Homœopathy, Allopathy and Young Physic.*—Messrs. Lindsay & Blakiston, of Philadelphia, have brought out a neatly-made half-pamphlet-and-half-book, of 121 duodecimo pages, bearing the above title. It is a re-print from an article in No. XLI. of the *British and Foreign Medical Review*, without note or comment by any American physician.

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*Braithwait's Retrospect.*—Part 12th, of the uniform New York edition, is ready for the profession. In Boston, Messrs. Jordan & Wiley, 20 State street, are the agents. No re-publication from the European press has been better received by medical men, than this *Retrospect of practical medicine and surgery*.

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*Ranking's Half Yearly Abstract.*—Part II. of an abstract of the medical sciences, by W. H. Ranking, M.D., which emanates from the press of those enterprising men, J & H. G. Langley, New York, ending with Dec., 1845, is ready both for purchasers and subscribers at Ticknor & Co.'s in Boston, and everywhere else where medical books are on sale. This is a valuable publication, embracing the pith and marrow of all the

highest class of periodicals in Europe. It is, as it claims to be, a practical digest of the principal British and continental medical works, published in the preceding six months. There is, moreover, a series of critical reports on the progress of medicine and the collateral sciences, during the same period of six months.

*Materia Medica in Rhyme.*—A warm advocate for the Thomsonian practice, has communicated a poem to the Botanico-Medical Recorder, that must have been taken with a wry mouth by the editor. However, he evidently wished to oblige a poet who sings on the major key in praise of a system that is invariably lauded in proportion to one's ignorance. Here is a specimen.

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" Botanic remedies were designed,  
To heal the body and soothe the mind.  
Let every tongue and every pen,  
Proclaim the virtues of cayenne.  
Nor will we fear to use it freely;  
Nor value less the good lobelia."

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*Manual of Health.*—In Boston a quarto sheet appears occasionally, bearing on its frontlet—"Manual of Health and Counterfeit Detector"—purporting to be published simultaneously at Philadelphia, New York and Boston. It has nothing to do with the subject of preserving health, as far as we can discover; on the contrary, the burden of its efforts is to praise certain pills—the fewer of which any one takes, the better off he will be.

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*Claims of the Temperance Reformation.*—An uncommonly dignified and persuasive address to the people of Massachusetts, on the present condition and claims of the temperance reformation, has recently been published by the association known as the Massachusetts Temperance Union. Seeing upon the title page the names of the President of Williams College, Hon. Samuel Hoar, and Dr. Woodward, of Worcester, we were induced to give more than ordinary attention to the address. It emanates from a high source, and cannot fail to command the respect of all men who love order, health and happiness. No class of persons understand the necessity of temperance better than physicians, and we feel quite sure that their untiring and unflinching efforts will always be in favor of the cause that is doing so much for the moral and physical reformation of those who have loved strong drink.

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*The Water Workers.*—Our ancient anti-animal-diet friend, Dr. Alcott, has finally moored his barque where so many of his fellow voyagers of the chestnut-pudding school have cast anchor, viz., in the harbor of hydrophobia. It seems, from an editorial notice in the Lynn Pioneer, that he has translated from the German of C. Ritter, "The Water Cure for debilitated Young Men, addressed to Fathers," to which he has added notes, critical and explanatory. If the doctor has fairly fallen overboard, without being drowned, he will unquestionably go to the death for water. His mind was long ago made up that it was not made to drink. We like his honesty of purpose, perseverance and good nature.

**Medical Matters at the South.**—Preparations appear to be on the tapis at Louisville, Ky., for a university, which will embrace the Medical Institute as one of its departments. The City Council have had a long talk about the charter.—In the Legislature of Tennessee, a bill was taken up on the 21st ult., to amend the laws in relation to the Lunatic Asylum at Nashville.—In that same city, according to one of the papers, a fear has been prevalent that smallpox had appeared, but the principal physicians of the place quieted the public mind on that subject. In the mean while, the mayor has published certain observations, followed by an article that appeared in the Albany Evening Atlas, Nov. 5, 1824, by one Dr. Moses Younglove, who recommended new milk in the treatment of the disease—or a dose of flour of sulphur. The leading idea is to keep the patient stuffed full of milk or brimstone!

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**Boylston Medical Prizes.**—The premiums for dissertations have this year been assigned by the Committee to the following gentlemen.

The two first prizes to Mr. James Winchell Stone, Boston, for a dissertation on "Hygiene," and to Mr. Charles Frederick Heywood, Cambridge, Mass., for a dissertation on "Necrosis."

Second prize to Mr. John Call Dalton, Jr., Lowell, Mass., for a dissertation on the "Mechanism of the Thigh, Leg and Foot."

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**Death from Aconite.**—A melancholy event, which has recently occurred to a respected member of our profession, forcibly sets forth the danger, not only of those who incautiously undertake the management of severe disease existing in their own person, but also of the venturing, without sufficient care, on the administration of powerful medicinal agents, with the operation of which we are but imperfectly acquainted. Dr. Male, of Birmingham, recently fell a sacrifice to these practices. He had been reading a work in which was recommended a new and powerful agent (aconite) for the removal of deep-seated neuralgic pains, and having been suffering of late from an affection of that kind, which had resisted the ordinary means for its removal, he was induced to try upon his person the powers of the remedial agent recommended. Not sufficiently mindful of his age, Dr. Male took the tincture of aconite in doses, the accumulation of which produced an alarming depression of the nervous system, from which he was ultimately unable to rally, and thus fell a victim to that want of a due appreciation of the circumstances of his own case, so common, we may add, amongst medical men when treating themselves, combined with the incautious use of a powerful drug, with the operation of which he was but imperfectly acquainted. This unfortunate case should prove a warning to every medical practitioner, as well in the pursuit of his professional avocations, as in inducing him, when himself suffering under serious illness, to have recourse to the advice of some brother practitioner.

—*Provincial Medical Journal.*

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**Effects of the Vapors of Zinc on the Animal Economy.**—M. Blandet has called attention to the symptoms inherent to the operations of the working of copper. These symptoms, not heretofore noticed, are mani-

fested in the afternoon of or morning after the melting days. The following are the principal symptoms: lassitude, muscular pains, oppression, headache, vomiting, shivering fits, continuing for three or four hours, and ending in copious perspiration and febrile reaction. These symptoms appear to be the effect of poisoning by zinc, which enters largely into the composition of bronze, brass, &c. The high temperature to which these alloys are submitted, in order to reduce them to fusion, explains why these effects are developed in the factories of which we speak, although they are not ordinarily observed in zinc foundries, where the temperature is not raised so high as to volatilize the metal. The vapors of zinc, carrying off a small portion of copper, being oxidized in contact with the air, fill the work room, and are deposited on the wall; it is under this finely divided form of oxide that the metal penetrates with the air into the respiratory organs. The malady produced by zinc does not last longer than from twenty-four to forty-eight hours.

Diaphoretics and purgatives appear to hasten the resolution of the symptoms produced by zinc. Warm wine and tea are very much used in these cases by the working founders.—*Annales d'Hygiene Publique, and Chemist.*

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*Pennsylvania Hospital for the Insane.*—At the date of the last report there were 151 patients in the Hospital, since which, 177 have been admitted, and 159 have been discharged or died, leaving 169 under care at the close of the year. The highest number in the house at one time was 174; the average number for the whole year has been 162—being more than at any previous period in the history of the institution.

Of those discharged, during the year, 1845, were—Cured, 80; much improved, 5; improved, 24; stationary, 30; died, 20. Total, 159.

Of the patients discharged "cured," 39 were residents of the Hospital not exceeding three months; 26 between three and six months; 12 between six months and one year, and 3 for a longer period than one year.

Of those discharged "much improved," 1 was under treatment less than three months, 3 between three and six months, and 1 for more than a year.

Of the "improved," 6 were under care less than six months, 3 between three and six months, 10 between six months and one year, and 5 for more than one year.

Of those discharged and reported "stationary," 8 were under care less than three months, 7 between three and six months, 6 between six months and one year, and 9 for a longer period than one year.

Nine males and 11 females have died during the year.—*Dr. Kirkbride's Report.*

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*Toronto General Dispensary.*—We have received a prospectus announcing the establishment of a Dispensary, under the above name, at Toronto. Institutions of this nature, when properly conducted, prove themselves valuable auxiliaries to the hospitals and other recipients for the indigent sick, and we are happy to learn that this one is extensively patronized, and likely to succeed beyond the most sanguine expectations of its projectors. Judging at this distance from the names of the gentlemen who are to con-



pose its medical staff, viz., Drs. Hamilton, Hodder, Rankin and Grassett, we doubt not the complete success of the charitable undertaking.—*British American Journal*.

**Medical Miscellany.**—Mr. Grimes is lecturing in Boston on the Science of Human Nature.—It is said that a New York chemist has analyzed an imported bottle of champagne, called *pure juice of the grape*, and found it to contain a quarter of an ounce of sugar of lead.—A medical student was arrested in New York, for stealing about \$50 worth of books from shops. He belonged to New Jersey.—A very complimentary meeting was held at Laporte University, at which resolutions were passed, expressive of the satisfaction of the students with the lectures on *Materia Medica*, recently delivered there by Dr. M. L. Knapp, of Chicago, Ill.—A slave died lately in Maryland, at the age of 124 years.—Liebig, the great chemist, is said to have stated "that an injury to health, from the use of diseased potatoes, is out of the question—and nowhere in Germany has such an effect been observed."—A new expedition has sailed from Liverpool to Africa, under the control of Dr. G. W. Daniels, a surgeon of some experience.—Dr. John G. Chalmers is editor of a new paper at Austin, Texas, called the *New Era*.—The Pope, say the foreign papers, has forbidden his subjects from attending any scientific congress, and physicians are not allowed to continue their attendance on patients, who do not receive the sacrament, after the third visit.—The Government of Waldeck, Germany, no longer permit drunkards to marry.—Dr. Huntington declines being again candidate for the mayoralty of the city of Lowell.—Chestnuts, in Italy, an important article of food in that country, are said to be diseased like the potatoes, the present year.—A child in England recently bled to death in consequence of having a tooth extracted. In the same family, sixteen persons, at various times, have bled to death from trivial wounds. A branch of the family of bleeders lives in Massachusetts.—Dr. Cazenave, of Bordeaux, has performed lithotomy fifty-two times in the last seven years.—The foundling hospital of Naples receives the average annual number 2,500 children—77 of whom die from deficiency of milk.

**TO CORRESPONDENTS AND SUBSCRIBERS.**—The papers of Dr. Warren on Scarlet Fever, Dr. Bartlett on Uterine Hydatids, Dr. Davis on Tumor resembling Spina Bifida, and Dr. Morland's letters from Paris, have been received.—The Title page and Index of Vol. XXXIII. will be sent out with next week's Journal.

**MARRIED.**—At Warner, N. H., Dr. L. W. Peabody, of Epsom, to Miss L. L. Kelley. —At Rochester, N. Y., John Rowley, M.D., of Parma, to Miss J. Smith.

**DIED.**—Charles Badham, M.D., Professor of Medicine in the University of Glasgow.—In London, Mr. Carpue, a celebrated surgeon.

**Report of Deaths in Boston**—for the week ending February 21, 51.—Males, 26, females, 24. Stillborn, 6. Of consumption, 9—scarlet fever, 6—croup, 3—bilious fever, 1—infantile, 6—inflammation of the lungs, 4—smallpox, 4—childbed, 1—brain fever, 1—inflammation of the bowels, 1—dropsy on the brain, 3—lung fever, 2—paralysis, 1—cholera infantum, 1—convulsions, 1—old age, 2—dropsy, 1—bronchitis, 1—disease of the spine, 1—worms, 1—cancer, 1.

Five years and under, 23—between 5 and 20 years, 4—between 20 and 60 years, 20—60 years and over, 4.

*Massachusetts Lunatic Asylum.*—The Thirteenth Report of the Superintendent states that

"The State Lunatic Hospital, with its enlargements and appendages, is now nearly filled with patients. The additions made by the appropriation of the Johannot fund, were partly finished in February last, and entirely completed in the month of July. They are already extensively occupied, having in them at this time about 70 male patients and 60 females. In all, we have now 360 patients occupying eighteen galleries, a few solitary apartments, and male and female dormitories for the sick. At the rate of increase since the new apartments were in readiness before they shall have been opened a year, every room will be occupied.

"With some imperfections, which could be remedied by building a large institution at once, instead of many times, this is a noble structure, affording comfortable accommodations, well arranged for classification, and well adapted to the wants of the insane."

"Patients in the Hospital in the course of the year, 556; at the commencement of the year, 263; admitted in the course of the year, 293; remain at the end of the year, 360."

"The expense of supporting a patient at the Hospital has varied, according to the value of the necessaries of life, from \$112 17 to \$169 48, averaging \$130 62. The average for the five years preceding the present year, is \$117. For the whole time of thirteen years, the average charge for board has been at the rate of \$2 50 per week, and for the five years preceding the present year, the average expense has been \$2 25 for each patient."

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*Spermorrhœa Cured by Pressure applied to the Perineum.*—In an article contained in the June No. of the *Annales de Chirurgie*, J. L. Brachet, of Lyons, says that a respectable citizen of that town had used pressure applied to the perineum, as a means of curing spermorrhœa, and learning from him what had been the result of the treatment, had employed it in a number of cases with complete success. He does not propose it as a substitute, in all cases, for Lallemand's treatment, but thinks it applicable to many, even in which the other treatment had failed. The cases treated by him had originated from the usual varieties of causes, such as gonorrhœa, masturbation, and other venereal excesses; in some, the emissions were nocturnal, in others, both nocturnal and diurnal, and others continued and unperceived. The debility, emaciation, and other deplorable consequences of this affection existed in the different cases, and some were brought to the brink of the grave, when the pressure was applied, and in all the reported cases a cure was effected.

In some of the cases, all the ordinary remedies had been employed, such as ferruginous tonics, baths; and even cauterization, without any apparent advantage.

M. Brachet says, that the few cases treated by him, are insufficient to enable him to establish general rules, or any positive precepts: but merely desires to call the attention of the profession to the experiment, that they may by repetition prove either useful or valueless.—*Gazette des Hôpitaux*.